

**UTILITY
PATENT APPLICATION
TRANSMITTAL**

(Only for new nonprovisional applications under 37 C.F.R. 1.53(b))

Attorney Docket No. 15343-0028C3

First Inventor Theodore E. Spielberg

Title MICROPOROUS ENCAPSULATED ENDOCRINE CELL
DISKS, BICONCAVE DISKS AND MULTIDIMPLED
CHAMBERS FOR HORMONAL REPLACEMENT

Express Mail Label No. EL705604957US

APPLICATION ELEMENTS

See MPEP chapter 600 concerning utility patent application contents.

1. ☒ Fee Transmittal Form (e.g., PTO/SB/17)
(Submit an original and a duplicate for fee processing)
2. ☒ Applicant claims small entity status.
See 37 CFR 1.27.
3. ☒ Specification [Total Pages 14]
(preferred arrangement set forth below)
- Descriptive title of the Invention
- Cross References to Related Applications
- Statement Regarding Fed sponsored R & D
- Reference to sequence listing, a table,
or a computer program listing appendix
- Background of the Invention
- Brief Summary of the Invention
- Brief Description of the Drawings (if filed)
- Detailed Description
- Claim(s)
- Abstract of the Disclosure
4. ☒ Drawing(s) (35 U.S.C. 113) [Total Sheets 1]
5. Oath or Declaration [Total Pages 2]
a. ☐ Newly executed (original or copy)
b. ☒ Copy from a prior application (37 CFR 1.63 (d))
(for a continuation/divisional with Box 18 completed)
i. ☐ **DELETION OF INVENTOR(S)**
Signed statement attached deleting inventor(s)
named in the prior application, see 37 CFR
1.63(d)(2) and 1.33(b).
6. ☐ Application Data Sheet. See 37 CFR 1.76

ADDRESS TO:Assistant Commissioner for Patents
Box Patent Application
Washington, DC 20231

7. ☐ CD-ROM or CD-R in duplicate, large table or
Computer Program (Appendix)
8. Nucleotide and/or Amino Acid Sequence Submission
(if applicable, all necessary)
a. ☐ Computer Readable Form (CRF)
b. Specification Sequence Listing on:
i. ☐ CD-ROM or CD-R (2 copies); or
ii. ☐ paper
c. ☐ Statements verifying identity of above copies

ACCOMPANYING APPLICATIONS PARTS

9. ☐ Assignment Papers (cover sheet & document(s))
10. ☐ 37 C.F.R. §3.73(b) Statement ☒ Power of
(when there is an assignee) Attorney
11. ☐ English Translation Document (if applicable)
12. ☐ Information Disclosure ☐ Copies of IDS
Statement (IDS)/PTO-1449 Citations
13. ☐ Preliminary Amendment
14. ☒ Return Receipt Postcard (MPEP 503)
(Should be specifically itemized)
15. ☐ Certified Copy of Priority Document(s)
(if foreign priority is claimed)
16. ☐ Request and Certification under 35 U.S.C. 122
(b)(2)(B)(i). Applicant must attach form PTO/SB/35
or its equivalent.
17. ☐ Other:

18. If a **CONTINUING APPLICATION**, check appropriate box, and supply the requisite information below and in a preliminary amendment,
or in an Application Data Sheet under 37 CFR 1.76:

☒ Continuation ☐ Divisional ☐ Continuation-in-part (CIP)
Prior application information: Examiner Nickol, G.

of prior application No: 09 / 397,780
Group / Art Unit: 1642

For **CONTINUATION** or **DIVISIONAL APPS** only: The entire disclosure of the prior application, from which an oath or declaration is supplied
under Box 5b, is considered a part of the disclosure of the accompanying or divisional application and is hereby incorporated by reference.
The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

17. CORRESPONDENCE ADDRESS☒ Customer Number or Bar Code Label

(Insert C



et here)

or ☐ Correspondence address below

Name Michael E. Attaya

PATENT TRADEMARK OFFICE

Address Cesari and McKenna
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State

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02210

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Name (Print/Type)

Michael E. Attaya

Registration No. (Attorney/Agent)

31,731

Signature

Date

August 13, 2001

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any
comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark
Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for
Patents, Box Patent Application, Washington, DC 20231.

FEE TRANSMITTAL

Patent fees are subject to annual revision on October 1.

These are the fees effective October 1, 1997.

Small Entity payments must be supported by a small entity statement, otherwise large entity fees must be paid. See Forms PTO/SB/09-12.

See 37 C.F.R. §§ 1.27 and 1.28.

Complete If Known

Application Number	Not yet assigned
Filing Date	Herewith
First Named Inventor	Theodore E. Spielberg
Examiner Name	Not yet assigned
Group / Art Unit	Not yet assigned
Attorney Docket No.	15343-0028C3

TOTAL AMOUNT OF PAYMENT (\$) 800

METHOD OF PAYMENT (check one)

1. ☐ The Commissioner is hereby authorized to charge indicated fees and credit any over payments to:

Deposit Account Number 03-1237

Deposit Account Name Cesari and McKenna, LLP

- ☒ Charge Any Additional Fee Required Under 37 C.F.R. §§1.16 and 1.17 ☐ Charge the Issue Fee Set in 37 C.F.R. §§1.18 at the Mailing of the Notice of Allowance

2. ☒ Payment Enclosed:

- ☒ Check ☐ Money Order ☐ Other

FEE CALCULATION (continued)

3. ADDITIONAL FEES

Large Entity	Small Entity	Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)
105	130	205	65
127	50	227	25
139	130	139	130
147	2,520	147	2,520
112	920	112	920*
113	1,840	113	1,840*
115	110	215	55
116	390	216	195
117	890	217	445
118	1,390	218	695
128	1,890	128	945
119	310	219	155
120	310	220	155
121	270	221	135
138	1,510	138	1,510
140	110	240	55
141	1,240	241	620
142	1,240	242	620
143	440	243	220
144	600	244	300
122	130	122	130
123	50	123	50
126	240	126	240
581	40	581	40
146	710	246	355
149	710	249	355
Other (specify)			
Other fee (specify)			
SUBTOTAL (3)			445

*Reduced by Basic Filing Fee Paid

FEE CALCULATION

1. BASIC FILING FEE

Large Entity	Small Entity	Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)
101	710	201	35
106	320	206	160
107	490	207	245
108	710	208	355
114	150	214	75
SUBTOTAL (1)			355

2. EXTRA CLAIM FEES

Total Claims	Extra Claims	Fee from below	Fee Paid
16	20**	0	0
Independent Claims	3**	0	0
Multiple Dependent			0

**or number previously paid, if greater; For Reissues, see below

Large Entity		Small Entity		Fee Description	
Fee Code	Fee (\$)	Fee Code	Fee (\$)		
103	18	203	9	Claims in excess of 20	
102	80	202	40	Independent claims in excess of 3	
104	270	204	135	Multiple dependent claim, if not paid	
109	80	209	40	**Reissue independent claims over original patent	
110	18	210	9	**Reissue claims in excess of 20 and over original patent	
SUBTOTAL (2)				(\$)	0

SUBMITTED BY

Typed or Printed Name

Michael E. Attaya

Signature

Michael E. Attaya

Date

August 13, 2001

Complete (if applicable)

Reg. Number

31,731

Deposit Account User ID

08/14/01

A

PATENTS
15343-0028C3

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In Re The Application of:)	
Theodore E. Spielberg)	
)	
Serial No.: Not yet assigned)	Examiner: Not yet assigned
)	
Filed: Herewith)	
)	Art Unit: Not yet assigned
For: MICROPOROUS ENCAPSU-)	
LATED ENDOCRINE CELL)	
DISKS, BICONCAVE DISKS AND)	
MULTIDIMPLED CHAMBERS)	
FOR HORMONAL REPLACE-)	
MENT)	

Cesari and McKenna, LLP
88 Black Falcon Avenue
Boston, MA 02210
August 13, 2001

EXPRESS-MAIL DEPOSIT

"Express Mail" Mailing-Label Number: EL705604957US

The following papers are being deposited with the United States Postal Service
"Express Mail Post Office to Addressee" service pursuant to 37 C.F.R. §1.10:

<input checked="" type="checkbox"/> Continuation Patent Application (14 pages including 16 claims)	
<input checked="" type="checkbox"/> Power of Attorney	<input checked="" type="checkbox"/> Oath or Declaration
<input checked="" type="checkbox"/> Fee Transmittal Letter	<input checked="" type="checkbox"/> Utility (Continuation) Patent Applica-
	tion Transmittal Letter
<input checked="" type="checkbox"/> Informal Drawing (1 sheets)	<input checked="" type="checkbox"/> Check No. 22891 for \$800.
<input checked="" type="checkbox"/> Petition for Extension of Time for 3	
Months	